CALIFORNIA FORM **7**()() FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

Please type or print in ink.

STATEMENT OF ECONOMIC INTERESTS RECEIVED PRACTICES COMMISSION CITY OF WEST HOLLYWOOD COVER PAGE

11 APR -4 AM 11:19

11 MAR 30 AM 9: 13

NAME OF FILER DURAN	JOHN JUDE
1. Office, Agency, or Court	
Agency Name City of West	Hollyward
Division, Board, Department, District, if applicable	Your Position Councilmember
► If filing for multiple positions, fist below or on an attachment.	
Agency:	Position:
2. Jurisdiction of Office (Check at least one box)	
☐ State	☐ Judge (Statewide Jurisdiction)
Multi-County	County of
Acity of West Hollywood	Other
3. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2010, through December 2010.	31, Leaving Office: Date Left/(Check one)
The period covered is, through December 3 2010.	31,
Assuming Office: Date	The period covered is/, through the date of leaving office.
Candidate: Election Year Office sought, if of	different than Part 1:
4. Schedule Summary	
Check applicable schedules or "None."	► Total number of pages including this cover page:
Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule attached
Schedule B - Real Property - schedule attached	Schedule E - Income Gifts Travel Payments schedule attached
-or- None - No reportable inte	erests on anv schedule
5 Varification	
I certify under penalty of perjury under the laws of the State of Califo	omia that
Date Signed 3/23/// (month, day, year)	Signatur
1 (

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700		
FAIR POLITICAL PRACTICES COMMISSION		
Name		

NAME OF BUSINESS ENTITY - UBS Financia	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
\$ 18 000 - TRA	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000	\$100,001 - \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	☐ Partnership ☐ Income Received of \$0 - \$499 ☐ Income Received of \$500 or More (Report on Schedule C)
IS ADDIVIDADES LIGHT DATE.	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//	//
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	S2,000 - \$10,000 S10,001 - \$100,000
\$100,001 - \$1,000,000 Dver \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	<u> </u>
//	
·	1
Comments:	

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALIFORNIA FORM	700
FAIR POLITICAL PRACTICES C	
Name	

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
DURAN & Thomas 11P	
Name Duran & Thomas, LLP Name Du 9200 Sunset Bl., W. Hollywood	Name
Address (Business Address Acceptable) 90051	Address (Business Address Acceptable)
Check one	Check one
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Law firm	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000/
\$1,000,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000	\$100,001 - \$1,000,000 ACQUIRED DISPOSED Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
NATURE OF INVESTMENT Sole Proprietorship Partnership	NATURE OF INVESTMENT Sole Proprietorship Partnership
General Vaction	Other
YOUR BUSINESS POSITION UGAR TAITMET	YOUR BUSINESS POSITION
A DENTIFY THE COOCCURCOME DECEMEN AND USE VOLUB BRO DATA	A RENTEY THE OBOOK MICOME RECEIVED WALLING VOUR BEO DATA
 2 IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST) 	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)
□ \$0 - \$499 > \$10,001 - \$100,000	\$0 - \$499 \$10,001 - \$100,000
\$500 - \$1,000 OVER \$100,000	\$500 - \$1,000 OVER \$100,000
└ │ \$1,001 - \$10,000	\$1,001 - \$10,000
► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach a separate proof it recrustary)	INCOME OF \$10,000 OR MORE (4)tach a separate short in percessing .
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity or	Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property	Street Address or Assessor's Parcel Number of Real Property
Description of Business Activity or	Description of Business Activity or
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000 / / 10
\$10,001 - \$100,000	\$10,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2010/2011) Sch. A-2
	FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE B

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Interests in Real Property (Including Rental Income) Name

STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LOCATION	
None		
CITY	CITY	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 / 10	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 / 10	
NATURE OF INTEREST	NATURE OF INTEREST	
Ownership/Deed of Trust	Ownership/Deed of Trust Easement	
Leasehold Other	Leasehold Other	
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED	
\$0 - \$499	☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000	
S10,001 - \$100,000 DVER \$100,000	S10,001 - \$100,000 OVER \$100,000	
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	
	al lending institutions made in the lender's regular course ublic without regard to your official status. Personal loans of business must be disclosed as follows:	
NAME OF LENDER*	NAME OF LENDER*	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER	
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)	
%	%	
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD	
\$500 - \$1,000 \$1,001 - \$10,000		
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000	
Guarantor, if applicable	Guarantor, if applicable	
	Guarantos, ii approado	

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
1) uran & I homas	City of West Hollywood
ADDRESS (Business Address Acceptable) West Hollywar	ADDRESS (Business Address Acceptable) We Ho CA
9200 Sunset B1. CA 90069	8300 Santa Monica B1. 90067
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm	Municipality
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION,
Partrer 1	Councilmember
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONCIDERATION FOR MAJICH INCOME MAC BEOFINED
Salary Spouse's or registered domestic partner's income	CONSIDERATION FOR WHICH INCOME WAS RECEIVED Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of	
(Property, car, boat, etc.)	Sale of(Property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other(Describe)	Other(Describe)
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI	OD
* You are not required to report loans from commercial	lending institutions, or any indebtedness created as part
of a retail installment or credit card transaction, made	
available to members of the public without regard to y	
not in a lender's regular course of business must be	disclosed as follows:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
Mone	M. [].
ADDRESS (Business Address Acceptable)	%
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	City
\$1,001 - \$10,000	
\$10,001 - \$100,000	Guarantor
OVER \$100,000	
	Other
	Other(Describe)
	Other (Describe)
Comments:	Other (Describe)

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

NAME OF SOURCE		► NAME OF SOURCE	
ADDRESS (Business Addres		ADDRESS (Business Address A	cceptable)
BUSINESS ACTIVITY, IF AN	Y, OF SOURCE	BUSINESS ACTIVITY, IF ANY, O	OF SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)
/\$		\$	
/\$		\$	
/ \$		\$	
► NAME OF SOURCE		➤ NAME OF SOURCE	·
ADDRESS (Business Address	s Acceptable)	ADDRESS (Business Address A	cceptable)
BUSINESS ACTIVITY, IF ANY	r, OF SOURCE	BUSINESS ACTIVITY, IF ANY, C	F SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)
	***************************************	 \$	
\$		\$	
NAME OF SOURCE		► NAME OF SOURCE	
ADDRESS (Business Address	s Acceptable)	ADDRESS (Business Address Ad	cceptable)
BUSINESS ACTIVITY, IF ANY	, OF SOURCE	BUSINESS ACTIVITY, IF ANY, C	F SOURCE
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)
<i>-</i>		\$	
\$		\$	
\$		\$	
Comments:			

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

- Reminder you must mark the gift or income box.
- · You are not required to report income from government agencies.
- You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.

NAME OF SOURCE	➤ NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (e)(3)
DATE(S):	DATE(S):// AMT: \$
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one)
DESCRIPTION:	DESCRIPTION:
NAME OF SOURCE	▶ NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S):	DATE(S):
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one) Gift Income
DESCRIPTION:	DESCRIPTION:
	[]
Comments:	
•	